

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) AND 1.27 (b)) - INDEPENDENT INVENTOR**

Docket No.
99-057

Serial No.	Filing Date	Patent No.	Issue Date
09/676,380	09-29-00		

Applicant/
Patentee: Nita J. Maihle, Andre T. Baron, Jill L. Reiter

Invention:

Soluble Epidermal Growth Factor Receptor-Like Proteins and
Their Uses in Cancer Detection Methods



As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled above and described in:

- the specification to be filed herewith.
- the application identified above.
- the patent identified above.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- No such person, concern or organization exists.
- Each such person, concern or organization is listed below.

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27)

FULL NAME Andre T. Baron

ADDRESS 1123 2nd St. NW Rochester, MN 55901

Individual Small Business Concern Nonprofit Organization

FULL NAME Jill L. Reiter

ADDRESS 1405 5th St. NE Rochester, MN 55906

Individual Small Business Concern Nonprofit Organization

FULL NAME Nita J. Maihle

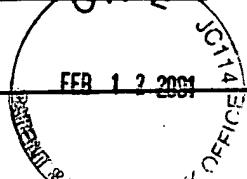
ADDRESS 2610 Viola Road NE Rochester, MN 55906

Individual Small Business Concern Nonprofit Organization

FULL NAME _____

ADDRESS _____

Individual Small Business Concern Nonprofit Organization



I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF INVENTOR Andre T. Baron

SIGNATURE OF INVENTOR Andre Baron

DATE: 11/20/99

NAME OF INVENTOR Jill L. Reiter

SIGNATURE OF INVENTOR Jill Reiter

DATE: 11/20/99

NAME OF INVENTOR Nita J. Majhle

SIGNATURE OF INVENTOR Nita Majhle

DATE: 11/22/99

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____

NAME OF INVENTOR _____

SIGNATURE OF INVENTOR _____

DATE: _____